### Title
Multicultural Medicine

### Context
**Theme:** Internationalisation of the Curriculum

The number of individuals from culturally diverse backgrounds living in Northern Ireland has increased in recent years with the arrival of migrant workers, asylum seekers and refugees. The changing cultural and social profile of Northern Ireland’s population has implications for the training of healthcare professionals who are now expected to deliver culturally competent healthcare. The General Medical Council (GMC) requires that students ‘must understand a range of social and cultural values and differing views about healthcare and illness’. To meet these requirements I have been designing, coordinating and delivering the vertical and horizontal integration of ‘Multicultural Medicine’ into the undergraduate Medical and Dental curriculum. This work also fits in with the University’s commitment towards promoting greater internationalisation of the curriculum.

### School/Subject/CETL
School of Medicine and Dentistry.

### Module/Pathway/Course
- **Student Selected Component (SSC) entitled ‘Multicultural Medicine’ (1st years).**

Multicultural Medicine is integrated into the following modules -
- The Individual in Society component of the Systems module (1st & 2nd yrs).
- Cross-Cultural Communication Skills module (2nd yrs).
- Primary Health Care module (4th yrs).
- Mental Health module (4th yrs).
- Preparation for Practice (5th yrs).

### Level /Recipients
- 1st & 2nd years (medical & dental students).
- 4th & 5th years (medical students).

### Activity
What do you do? (content, assessment etc)
- The SSC ‘Multicultural Medicine’ is a series of lectures, workshops and group discussions which focus on healthcare issues and the health and illness of the local ethnic minority population e.g. Muslims, Indians, Black Africans, Travellers, Chinese, Asylum seekers and refugees. Other topics include ‘Cultural aspects of psychiatry’, ‘Chinese medicine’, ‘Patterns of health and disease among ethnic minorities’ and ‘Healthcare systems’. Students are assessed in an essay and a poster presentation.
- The Individual in Society module focuses on the psychological, behavioural and social factors that contribute to the prevention, onset and management of health and illness that are linked to different body systems. I have included several multicultural topics which are relevant to some of the systems e.g. ‘Culture and Nutrition’; Health throughout the life-cycle which encompasses cultural variations in relation to childbirth and dying and death; Patterns of Health & Disease among different ethnic minority groups; ‘Sociology of the
Body' which also looks at how views of the body differ between ethnic groups & the implications for health and illness; Cultural aspects of stress and health. Students are assessed using multiple choice questions (MCQs).

- **The Cross-Cultural Communication Skills module** aims to enhance the knowledge and skills of students towards improving communication with people who do not speak English. The module includes a lecture followed by a 2 hr workshop. The workshop includes an exercise on promoting self-awareness among students of the impact of their personal culture and the culture of medicine and dentistry for how they communicate with people from different cultures; an exercise on stereotyping; a role play to demonstrate the impact of culture for non-verbal behaviour; a video on interpreting issues. Assessed in a simulated role play.

- **The Multicultural lecture in the Primary Health Care Course** focuses on issues likely to arise in a primary healthcare encounter. Topics include patterns of health & disease among ethnic minority groups; culture-bound illnesses; how religious beliefs may affect compliance with medication; how cultural beliefs & behaviours may affect communication & consent to treatment; awareness of issues that may affect the registration of ethnic minority groups with general practices. Assessed through examination.

- **Transcultural Psychiatry (Mental Health module)** focuses on the mental health of ethnic minorities in the UK and meeting their mental health needs and culture-bound syndromes relevant to mental health.

- **The ‘Multicultural Medicine’ lecture for Preparation for Practice** highlights cross-cultural issues students may encounter as junior doctors in hospital e.g. cultural and religious variations in relation to breaking bad news, dying and childbirth; implications of religious beliefs for treatment compliance; cultural beliefs about modesty & dress; working with interpreters; patterns of health & disease.

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**How do you do it? (method including tips)**

- **Most of the classes for the SSC** are facilitated by individuals in the community from different ethnic groups who discuss the implications of their religious and cultural beliefs for their healthcare. The classes are designed to be interactive and the discussion following each lecture is student-led with the students asking questions which they feel are pertinent to their future role as doctors. Classes are also held in ethnic minority community and religious organisations which the students visit e.g. Indian Community Centre, Northern Ireland Muslim and Family Association, An Munier Tober Travellers Group.

- **The lecture for the Cross-Cultural Communication module** is designed to include interactive exercises. This is followed by a 2 hour workshop which includes exercises and a role play to promote self-awareness of stereotyping and students' personal culture and the culture of medicine for verbal and non-verbal communication followed by a discussion of videos on interpreting issues.

- **The Multicultural Medicine lectures** which are integrated into the Individual in Society, Primary Health Care, Transcultural Psychiatry and Preparation for Practice are traditional lectures designed to include interactive exercises and case studies. The Transcultural Psychiatry lecture is a joint lecture with a psychiatrist, so that expert knowledge of psychiatric culture-bound syndromes may be included.
Why do you do it that way?

- SSC – it provides students with an opportunity to meet individuals from different religious and cultural groupings and to receive information that is relevant to the local ethnic minority population. Visits to the community organisations allow the students to place the ethnic minority groups within a context and for most it is their first time in a mosque or a Hindu temple; it also facilitates access to difficult to reach populations e.g. Travellers.
- Cross-Cultural Communication – the lecture is designed to establish what the students already know and to introduce them to key concepts in preparation for the workshop. The workshop provides for most of the students the only opportunity to reflect on how their own culture, prejudices and stereotypes affect how they communicate with people from different cultures and allows them to practise skills. The video provides examples of bad and good practice when communicating with people who do not speak English.
- The exercises, for example the use of quizzes in the lectures for the Individual in Society, Primary Health Care, Transcultural Psychiatry and Preparation for Practice, are an alternative way to provide factual information; they generate discussion that is student-led and they are useful in establishing what the students already know. The case studies reinforce the relevance of the information and allow the students to apply their knowledge to healthcare scenarios.

Evaluation/Reflection/Outcomes

How do you know it works?

- Evaluations from students and other staff who facilitate the teaching on some of the modules provide positive feedback.
- Students’ performance in assessments.
- The GMC in their recent inspection of the Medical School (2005) highlighted the SSC Multicultural Medicine as an example of good practice.

Challenges/Issues/Problems

- Appropriateness of traditional forms of assessment in Medicine e.g. multiple choice questions for the topic Multicultural Medicine.
- Ensuring that Multicultural Medicine is included in the assessments to reinforce its importance and relevance.
- Attaching Cross-Cultural Communication skills onto the end of the Communication Skills module in the Spring Semester for 2nd yrs reinforced the perception of cross-cultural communication as an add-on and different from the general communication skills module. This may have contributed to students’ attitudes that it wasn’t essential, contributing to poor attendance.
- Ensuring that students, particularly those in 2nd, 4th & 5th yrs have sufficient background information, since for most this is the first time they would have dealt with multicultural issues in detail.

Advice And Tips

Looking forward

- I aim to set up a website on Multicultural Medicine to complement the current teaching and to facilitate the horizontal and vertical integration of Multicultural Medicine into the undergraduate Medical and Dental curriculum.
- Improved integration of Cross-Cultural Communication skills into the 1st and
2nd yr communication skills module – hence the self-reflective topics would be more relevant to 1st yrs, freeing up more time to focus on improving the communication skills of 2nd yrs through more role plays.

- Replace the assessment of the Individual in Society using MCQs with case studies that are better suited to the topic of Multicultural medicine.

Support Material (please upload/attach or give url)

References

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